

**GREENSIDE GROUP PRACTICE**  
**MINUTES OF THE PATIENT PARTICIPATION GROUP MEETING**  
**MONDAY 25<sup>th</sup> FEBRUARY 2019**

**Present :** Jane Passfield (Practice Manager), Paul Dancy (Chairman), Susan Horner, Sandra Bryant (Minute Taker) Peter King

**Apologies for Absence:** Apologies from Jonathan Bell and Alex Anthony

**Minutes of Last Meeting:** Approved

**Matters Arising:** There were no matters arising

**Practice News:**

**EMIS Update:**

Due to the cabling problem at Country Park there is still no EMIS and nothing has been signed off. However, after meetings with EMIS the practices have been allocated a Project Director and are now working close together. It has been decided to start from scratch. There is now a deadline for both practices to be up and running by 28<sup>th</sup> June this year.

**Creating Conversations in Croydon – “The Art of Dying Well” Event**

A Community Forum has been set up for “the art of dying well” to discuss end of life care in Croydon. It will be held on 20<sup>th</sup> March 2019 between 6 – 9pm at Braithwaite Hall in Katharine Street.

Croydon residents have been invited to share their experiences of supporting a family member or friend through the dying process with end of life care professionals and community leaders from across Croydon.

Join the conversation at this free event by booking via <https://theheartofdyingwell.eventbrite.co.uk>

**Connecting Your Care:**

Connecting your care means that people involved in your care, such as your GP, Hospital doctors or nurses at the participating hospitals (Croydon health services, St George’s, Kingston, Epsom and St Helier) will be able to see important information about you through a secure system. This will help them make the best decisions about your care, which could be lifesaving in emergency situations.

In the future, other health and social care providers will also be involved to share a more detailed care record for you, which will include the treatment you receive from community services, mental health and social services.

Benefits will include only having to tell your history once, avoiding unnecessary or repeated appointments and tests. Decisions about your care can be made more quickly with more information available.

If you do not want your information to be shared you do have the right to opt out.

### **Patient Survey 2018/19**

It was agreed by the PPG committee members to use the same survey questionnaire as last year in order for comparisons to be made.

127 surveys were completed.

63% of patients felt that it was easy/fairly easy to get through to the practice on the telephone – this compared with 64.2% last year. 55.9% were aware that they were able to have a telephone conversation with a GP.

95.3% of patients felt that practices were very/fairly clean, which compared with 97% last year.

66.9% felt that they could be overheard in the reception area, but did not mind. This compared with 65.7% last year.

85.8% of patients felt that the receptionists were very/fairly helpful. This compared with 88.1% last year.

93% of patients were very/fairly satisfied when they last saw a member of the clinical team. This compared with 92.6% last year.

67.7% were aware that they could book an appointment and order repeat prescriptions on line. This compared with 56.7% last year.

General comments included:

More appointment needed. Difficult to get an appointment. Cannot get through on the phone or takes a long time to answer. Attitude of some receptionists. New receptionists “like a breath of fresh air”

Action plan:

To continue awareness of telephone consultations via web site – Newsletter and reception staff.

To continue awareness of online bookings for appointments and repeat prescriptions – Newsletter and reception staff.

To look at the appointment system with PPG involvement

Reception training – ongoing.

### **Any Other Business :**

A comment was raised concerning some difficulty with getting an appointment, either to pre book or on the day, with receptionists advising patients to visit one of the GP HUBs. Unfortunately, the HUB GPs are not able to make a referral and the patient is

then sent back to his/her GP or A & E to be referred. A question was asked are the receptionists aware of this.

Also Moorfields eye unit used to have a drop in system, where if an emergency arose the patient could be seen without an appointment. This drop in system is not recognised by Moorfields anymore. If, for example, a patient was told to see a HUB GP with a detached retina and could not make a referral, then emergency treatment would be delayed and could cause blindness. Jane to look into retraining receptionists.

### **Dates of next meetings for 2019**

8<sup>th</sup> April

3<sup>rd</sup> June

29<sup>th</sup> July

21<sup>st</sup> October

9<sup>th</sup> December